

Welcome



Questions?

Write them down and put them in the box!



Monitoring

Looking back & Moving forward

2013-2016 Monitoring Standards

Bernadette Lahr & Kate Girard (Missoula)

Leah Steinle & Chris Fogelman (Billings)



Process changes used in FY13-14:

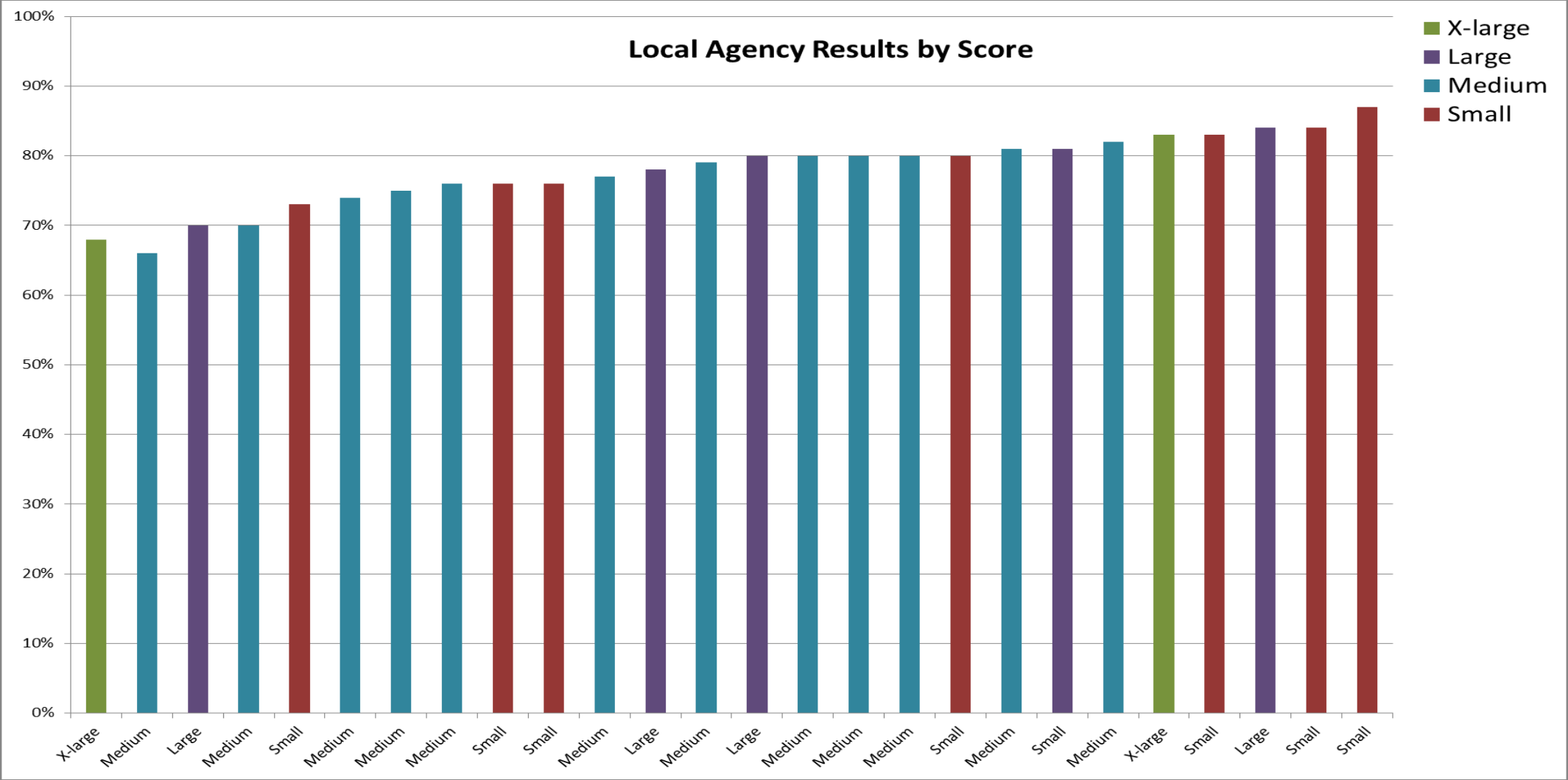
- # of participant charts reviewed depending on size
- Scored findings
- Tiered results
- Corrective action steps tied to “tier” score
- Follow up by State staff was guided by agency tier score

RESULTS OVERVIEW

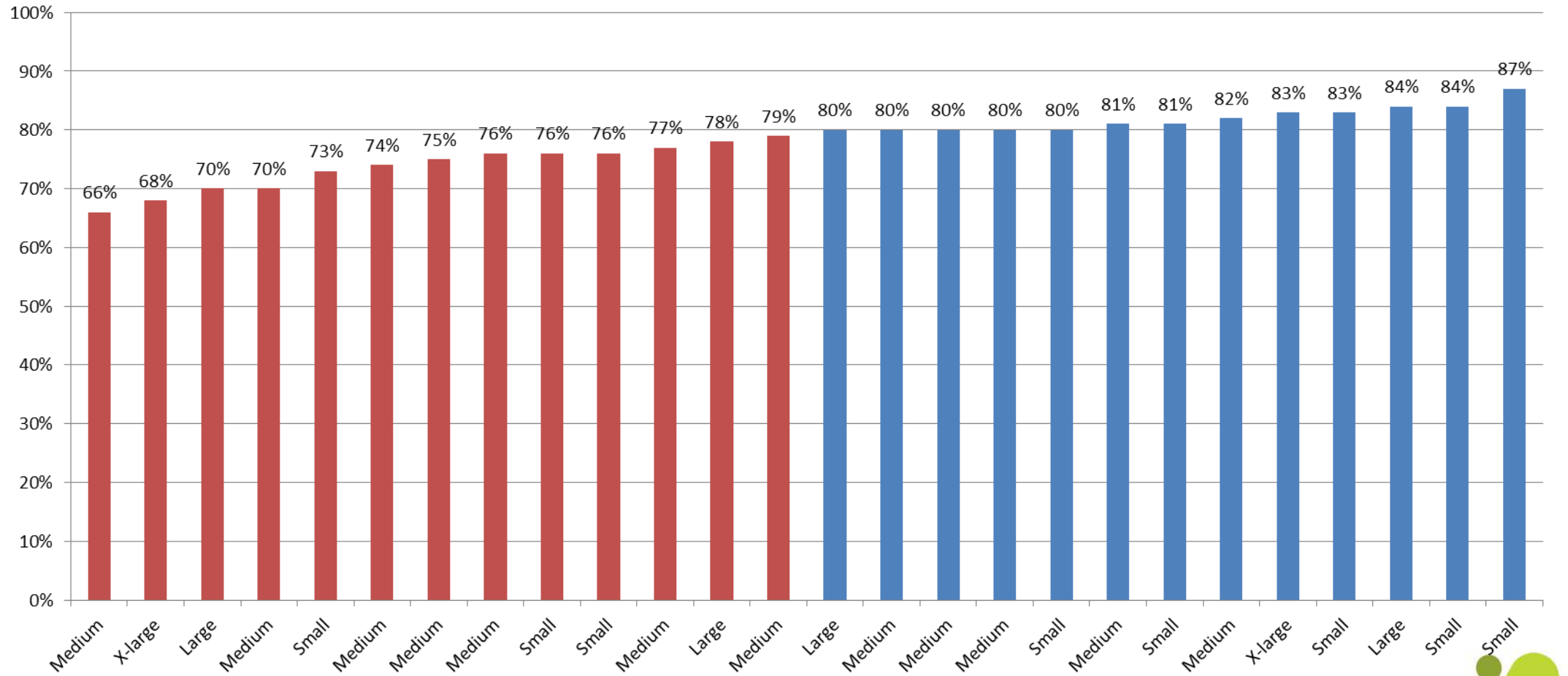
FIRST ROUND



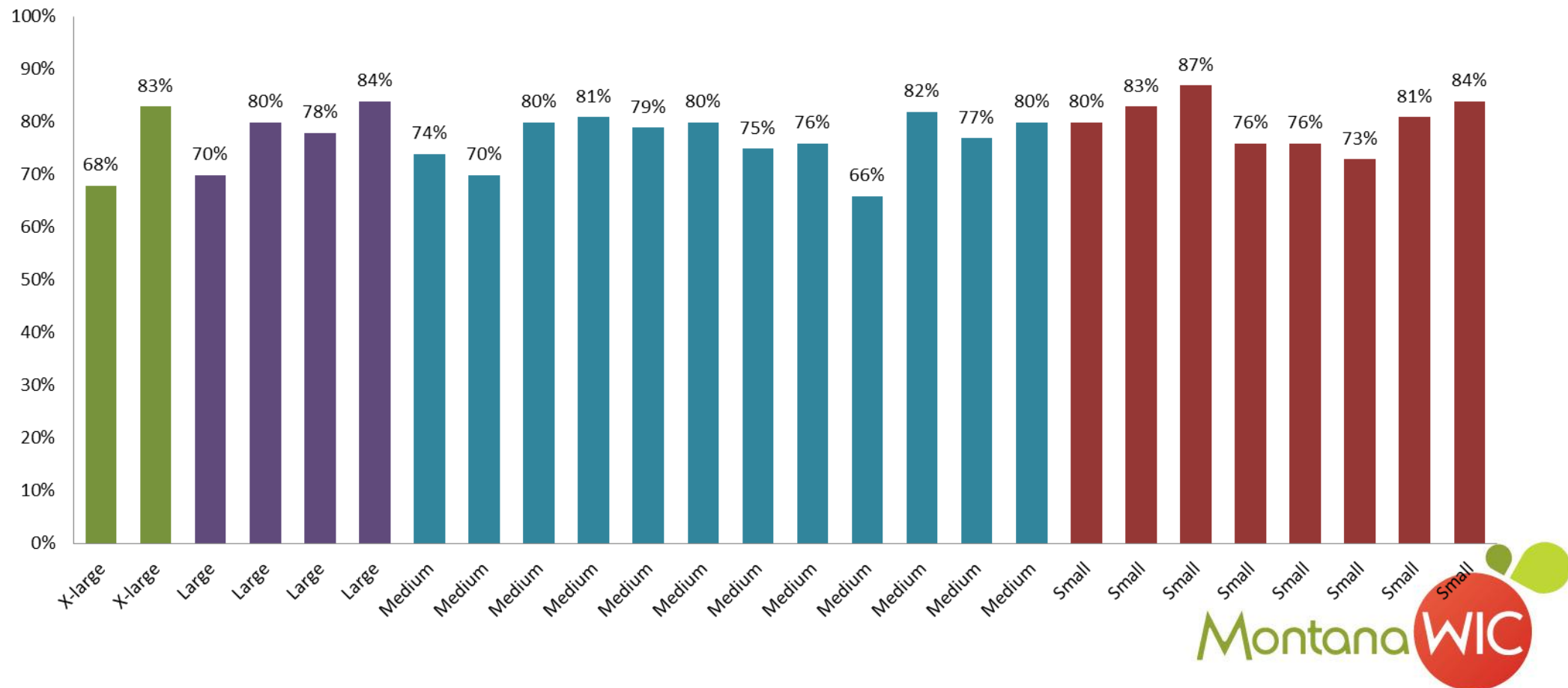
LOCAL AGENCY RESULTS BY TOTAL SCORE



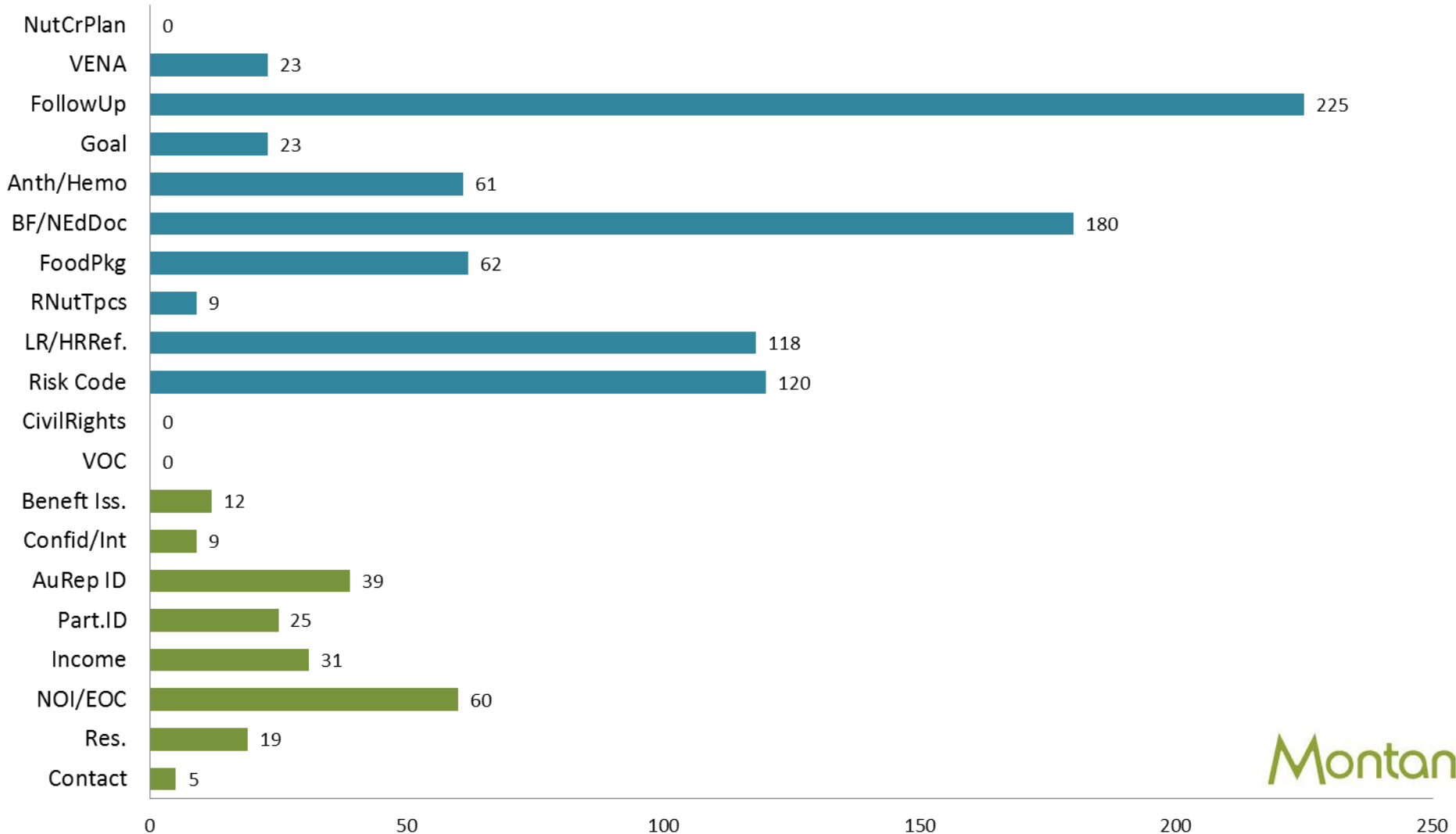
Local agencies by tier for FY13 & 14



Local agency monitoring scores by size of agency



Number of findings by individual field



MONITORING SURVEY



Monitoring Survey Results.

1. Do you feel your local agency's most recent monitoring results were fair?
60% of the responses said yes, 31% said sort of and 9% said no.
2. Do you feel the follow-up activities for monitoring helped you improve the accuracy of your charts?
60% said yes, 31% said sort of 9% said no.
3. Do you feel state staff spends an appropriate amount of time in the clinic during a monitoring visit?
89.5% said yes – appropriate length of time.



Questions Continued...

4. Would you like technical assistance visits from the state office in addition to monitoring visits?

40% said yes, 60% said no

“It would be nice to offer non-threatening visits for education and clarification”

“So far, the phone has worked well.”

Questions Continued...

5. What went well during your last monitoring visit? What needs improvement? When responding to this question, please think about the new monitoring format

“Thought it went generally well”

“Staff was very kind and helpful. Very frustrating not to know specifically what needed improvements since two clinics were bunched together.”

“Requirements were clearer in most areas and that was appreciated.”

“...are looking at the big picture so that is very good – I like the new format.”



More comments....

6. Any other suggestions or recommendations that you would like to add?

“Recommend keeping the conversations positive in nature. Local staff work so hard to not only comply with the policies and regulations but they also have to balance that with offering high quality care to families. Too much emphasis on compliance tends to send the message that quality care doesn’t matter.”

“More communication on how things are one RIGHT. We want direction on how we should do the job correctly.”

“...I would appreciate working smarter, not harder!”

*Abbreviated comments are shown.



Two Year Results Reviewed – as promised

- **Presented to the WIC Future Study Group (WFSG)**
- **Recommended changes from WFSG and State Staff considered**
- **Changes to process have been made for the upcoming monitoring cycle**

WFSG Discussion -

- Increase the time providers have to complete their charting. Several intervals were discussed but the group settled on 24 hours or the “close of the next day of business.”
- Some liked the new method for corrective action but others wanted their front line staff to have input so suggested a round table on this issue at the fall conference.
- Some would like a standardized abbreviation list and some would like to use only a few, most used abbreviations.
- Some would like SOAP note and category-based template development and education.
- Several would like SPIRIT to be tailored to help more with documentation, even if it takes time get the software upgraded. Cues are important – can the system alert us to missing data?
- Voice recognition software like Dragon can be used in Word. This could speed up notes which can be cut and pasted into SPIRIT.
- One person suggested the state staff observe a certification and score that.
- Some like knowing what the state is looking for – good to have the details.
- Some like the new system for quarterly chart monitoring.
- Many like the more detailed, systematic, and fair approach – are able to use findings to improve care.
- Should use the data and focus on the areas where there is the most need for training/education.



Changes Introduced for FY15-16

- **Areas of findings scored has a few changes**
- **Documentation requirements have changed**
- **Templates for use by local agencies have been prepared for certain documentation areas**
- **Abbreviation lists available for local staff use**
- **More time to complete participant notes after appointment ends – 24 hour window**

Monitor Scoring to stay**



****at least for the next two years**



FIRST TIER:

Total score of 80% or higher -

SECOND TIER:

Total score between 65% to 79%:

THIRD TIER:

Total score lower than 65% -

Agency size by participant numbers

Local Agency participation	400 or less	401 – 1000	1001 – 2000	2001 and up
Agency size	small	medium	large	extra-large
Number of Files reviewed	8	16	32	32 + 8

Size adjustment differences -

- **SMALL AGENCIES (300 or less): 9**
- **SMALL (400 or less): 11**
- **MEDIUM AGENCIES (301 – 1000 participants): 11**
- **MEDIUM (401-1000): 10**
- **LARGE AGENCIES (1001-2000 participants): 4**
- **X-LARGE AGENCIES (2001 and up): 2**



Administrative Review Findings

The administrative team member will review the client records for complete documentation of:

- **Income**
- **Proof of residency**
- **Proof of participant identification**
- **Proof of authorized representative identification**
- **Notice of end of certification/ineligibility**
- **Benefit issuance (signed, mailed, void or proxy signature)**
- **Initial contact date**
- **Confidentiality/Integrity**
- **VOC Process**
- **Civil Rights**



Onsite Administrative review -

- Conduct a visual site review for:
 - Space
 - Security
 - Privacy
 - Inventory control
- Review original documents (timesheets/cards for WIC employees, all items listed on the expenditure reports chosen for audit and how it is distributed among programs, etc.)

Nutrition Monitoring

- Risk Codes
- Referrals
- Core Education Topics
- Food Packages
- Documentation of Nutrition Education
- Anthro/Hgb
- Goals
- Nutrition Assessment
- Care plans
- Observation
 - Customer Service
 - Anthro/Hgb Technique
 - Required Posters Displayed
 - Confidentiality
 - Nutrition & Breastfeeding Plans
 - Breast Pump Log
 - Breastfeeding Orientation Plan (new employees)

*See “Nutrition Findings” Handout



Risk Codes

- At least 1
- All that apply will be assigned
- Back-up documentation where needed (i.e. how medical condition affects nutrition, inappropriate nutrition practices...)
- Updated throughout cert.

****Please review revised Nutrition Risk Codes****



Referrals

- Still required at cert.
- See 5.2 for updated requirements
 - Medicaid, SNAP, TANF, IZ
- “No referrals” must have reason
- High Risk- same
- Follow-up included in finding

Required Education (Core)

- Rights & Responsibilities (every cert)
- WIC Food Package (every cert)
- Breastfeeding (every cert- pregnant/BF women)
- Purpose and Benefits of the program (initial cert and as needed)
- Substance use (initial cert and as needed)



Food Package

- Assignment
 - CPA assigns/approves package and any changes
 - RD approves FP III
- Issuance
 - Over/under issuance, correct package
- Tailoring
 - Less than full nutrition benefit
 - Alternate milk (fat level, soy, goat, etc.)
 - CPA assessed package/formula changes- note on next slide (similac sensitive, RTF formula, etc.)

Tailoring

- Formula Changes:

*Please DO document reason for formula changes, even if “standard”.
This helps other employees to follow the trail of changes and what is going on with the baby*

- The following is **NOT** considered tailoring:

- Cheese- when 1 lb. is substituted for 3 qts. of milk
- Lactose-free milk
- Exchanging beans for peanut butter (and vice-versa)

Nutrition/BF Education

- Generally the same... 4 contacts per year, 2 per 6 month certification, approximately quarterly
- Education with issuance is expected
 - Exception may be if participant is issued frequently due to a family member being high risk...the person driving the issuance *should* receive education; or a foster care child.
- Document details of what was discussed, handouts given, and **follow up** to pertinent topics from last visit

Anthropometric/Hematological

- Data collected per SP 5.2 (timing, documented appropriately)
- Follow up completed when necessary
- Change: we took out “technique” from chart review part, but included this in observation
- Discuss growth with participant/caretaker- document this

Goal

- Mostly the same, but we added follow up to this section.
- Remember to re-set goal throughout cert as needed (i.e when previous goal was met or no longer relevant)
- Participant stated

Nutrition Assessment

- No change
- Expected at cert and mid-cert (as needed)
- All questions will be addressed
- Try to simplify data entry to what is nutrition/health-related

*You can ask these in your own words in an open ended manner, saves time

Care Plan

- Change: only required at cert and mid-cert (by CPA) and will include follow up appt(s) for that period.
 - So... don't have to do the whole cert period!
- Be specific for the next person to follow
- Include: next appt. type/timing, what to do/follow up on, topic of education, other info as needed
 - If it is an infant or other participant on a normal schedule (every 3 months, mid-cert, etc.) so no need to specify timing- just when it changes from policy.

Observation: NEW

- Customer Service/quality of participant-staff interaction
- Anthropometric & hematological technique
- All required posters are displayed
- Confidentiality
- Nutrition and Breastfeeding Plan on file
- Breast pump log
- Breastfeeding orientation for new employees



Clinic Observation Form

- Nutrition and Admin each have one
- These do not count toward findings
- Considered best practice or topics for discussion if found

Next Round

- We anticipate will be much better
- Great progress on charts already
- Great learning experience last time (for all of us)
- Trying to make it as fair as possible

Local Agency Self-Monitoring

- **Federal Regulations require that each local agency establish a system to review their program operations and that of each of their satellites.**
- **State WIC Office staff recommends local agencies utilize the same methods and materials state monitoring teams use for monitoring visits.**
- **Local agencies will maintain results of their reviews on file.**



Sample Scoring Spreadsheet

Area	Fields/Findings	Files	Occurrences	Weight	Percentage	Score
Administrative	Initial Contact Date	8	0	10	100%	10.0
Administrative	Residency	8	0	10	100%	10.0
Administrative	Notice of Ineligibility/End of Certification Notice	8	0	10	100%	10.0
Administrative	Income	8	0	10	100%	10.0
Administrative	Participant ID	8	0	10	100%	10.0
Administrative	Authorized Rep ID	8	0	10	100%	10.0
Administrative	Confidentiality/ Integrity	8	0	10	100%	10.0
Administrative	Benefit Issuance	8	0	10	100%	10.0
Administrative	VOC Process	8	0	10	100%	10.0
Administrative	Civil Rights	8	0	10	100%	10.0
Nutrition	Risk Code Assignment	8	0	10	100%	10.0
Nutrition	Referrals	8	0	10	100%	10.0
Nutrition	Required Education Topics	8	0	10	100%	10.0
Nutrition	Food Package	8	0	10	100%	10.0
Nutrition	Education Documentation	8	0	10	100%	10.0
Nutrition	Anthropometric Documentation	8	0	10	100%	10.0
Nutrition	Goal	8	0	10	100%	10.0
Nutrition	Nutrition Assessment Questions	8	0	10	100%	10.0
Nutrition	Nutrition Care Plan	8	0	10	100%	10.0
Nutrition	Observation	8	0	10	100%	10.0
Files ¹	(Files with one or more occurrences)	4	4	50	0%	0.0
Fields/Findings ²		20	0	50	100%	50.0
Total Score				300.0	83%	250.0

Suggestions for local agencies.

1. Review “scored” areas - good to know what the State reviews
2. Read packet information sent out before monitoring (ask directors to share)

Relax, we just want to make **everyone's WIC experience better!**



QUESTIONS?????

Please put them in the box. Thanks so much!



State Plan

2015 Changes



State Plan

- See “Summary” sheet
- List identifies what is worth reading- affects day to day
- Also lists policies worth reviewing
- Attachments (nutrition):
 - Revised Nutrition Risk Codes
 - New Medically Necessary WIC Approved Formula Request Form (Effective 10/01/2014)
 - Request for Similac Formula (5/14/14)
 - Breast Pump Log (6/13/2014)
 - Monitoring forms



Revised Administrative Forms:

- Updated attachments with Civil rights language change:
 - End of Certification Notice
 - Participant Fraud & Abuse Form
 - Participant Rights and Responsibilities Form
 - WIC Program Warning Letter
- Administrative monitoring Forms:
 - Administrative Chart Review Form
 - Administrative Observation Review Form
 - Administrative Findings – 2015



Chapter 3

- Policy 3.7
 - WIC Employee Integrity
- Policy 3.9
 - Confidentiality

Chapter 4

- 4.3
 - Barriers to service
- 4.5
 - Roles: aide role updated (low risk ed.)
 - Training Coordinator- see new training form
- 4.6
 - New CEU form for webinars, articles, etc.
 - Check out newsletters for CEU opportunities!
- 4.9
 - Removed health worker IZ policy

Chapter 5.1

- Identification
- Income- see next slide
- Residency proof

Income documentation

1. Adjunctively Eligible programs:
 - An award letter or electronic verification will be acceptable as documented eligibility.
2. Changes to Income:
 - If income changes at **any time** during the certification period, the participant needs to notify the local agency for an eligibility evaluation.

5.2

- Hemoglobin update- see slide
 - Also- exception added for medical conditions
- Risk Codes
 - See handout- PLEASE read all
- Referrals
 - All without Medicaid, SNAP, TANF need referral
 - All 0-24 month olds need IZ screening/referral as needed
- Core Topics- see slide (also ch.6)
- SOAP
 - Please don't refer to other areas of the chart
 - See outline in SP or SPIRIT mod for training

5.2 Hemoglobin

Category	Age	Certification	Mid-Certification	Follow-Up Appointment
Infant	9-12 months**	Yes	N/A	Yes**
Child	1 year	*Yes	Yes	No
Child	2-5 years	Yes	Only if low at certification	No
Woman	Any	Yes	No	Only if low at certification

Exceptions:

- Referral data within 90 days, or completed within 90 days (in clinic)

*This means that for a 1 year old who had hgb between 9-12 months...

SKIP!

** Only 1 hemoglobin is needed between 9-12 months, whether it is a certification OR at the regular infant follow up appointment.



Core Education Topics

- Were:
 - Purpose of program, benefits of program, risk codes, substance use, rights and responsibilities and breastfeeding
- Now are:
 - Purpose & benefits of program
 - WIC Food Package
 - Substance Use
 - Rights and Responsibilities
 - Breastfeeding



Notice of Certification End -

- All participants **will** be issued a notice of certification end **each time** the certification is ending.
- At least 15 days prior to their certification end date **or** when their last set of WIC benefits for the current certification are issued.
- If they miss the last appointment that falls 15 days prior to the certification end date, the End of Certification will be mailed without benefits.



Chapter 6

- 6.1 Education Plans- now attachments
- 6.2
 - Care Plans: Written at cert and mid-cert for interim appts (by CPA)
- 6.3
 - Nutrition Education Contacts: 4/yr. cert, 2/6 mo. cert- quarterly, please document education with issuance or at least every 3 months
 - Follow up education- a lot of options for low risk
- 6.4
 - No changes- just a reminder to refer according to HR table

Chapter 7

- 7.2
 - The Breastfeeding Peer Counselor may not be professional staff such as a CPA or RD, (and prefer not WIC staff)
- 7.3
 - Breastpump log to use for tracking all of the issued breastpumps, returned multi-user pumps and the **cleaning of multi-user pumps** (Breastfeeding Attachments)
 - Remember this is now part of “observation” during monitoring



Chapter 8

- 8.1
 - Replaced whole policy with an attachment of the food list
- 8.3 (see subsequent slides)
 - Tailoring- significant changes
 - Milk Changes
 - Formula/food package 3
- 8.4
 - More food package 3 changes

8.3 Tailoring

- Any change to a standard food package
 - **EXCEPT** standard substitutions such as cheese and lactose-free milk
 - Requires documentation by CPA or RD
 - Reason must be clear
 - Will be assessed during monitoring

Examples

- Change in formula
- Exempt infant formula and other medical foods/nutritionals (RD)
- Soy, goat, alternate fat content of milk (CPA)
- Exchange of infant f/v for fruit and vegetable benefit at 9 mo.
(CPA)... future option in SPIRIT
- Exchange of fruit and vegetable benefit for infant f/v (RD/MD)
- Deletions or reductions in food based on request, medical condition or assessment by CPA/RD



Chapter 8- *More on Milk*

- Women receiving a fully breastfeeding food package have a 6 quart maximum exchange of milk (FP7):
 - They can request up to 2 pounds of cheese in exchange for 6 quarts of milk
- All others have a 4 quart maximum exchange of milk
 - 3 quarts can be exchanged for 1 pound of cheese
 - This will result in 3 gallons and 1 quart of milk (i.e. children)
 - May do evaporated milk in place of 1 quart, or may tailor down

*See “2015 Default Food Packages” handout



More milk

- Soy, goat & alternate fat content
 - CPA may assess and assign
 - Not “option”, must document **valid** reason (see SP)
- Soy dangling quart...
 - Fluid, regular soy milk is not allowed in quart size
 - If cheese is requested on soy milk package, may add 1 quart of Pacific Ultra- otherwise document “tailoring” down package
 - Pacific Ultra **MUST** be specified on check, not simply chosen at the store
 - Usually cheese would not be appropriate for soy package

Chapter 8: Rx for Food Package 3

- The Health Care Provider can defer to RD for supplemental foods approval (October)
- Can Tailor:
 - for less than the maximum
 - for substitutions (soy beverage for milk; infant cereal for adult)
 - for no foods:
 - a) For infants with appropriate justification the 4-5 mo amount of formula for older infants
 - b) It also means no additional formula if not an appropriate justification
 - Can modify the supplemental foods throughout the life of the prescription

Chapter 8: Special Circumstances

- Transfers with an original prescription, may request RD review for approval
 - Will not need to get a new prescription from in-state health care provider until old prescription approval expires.
- With WIC Helpdesk assistance can substitute peanut butter or canned beans for eggs on a food package for homeless participants

Chapter 8: Policy 8.6 Issuing Benefits

V. Benefit Over-Issuance

- A. An over issuance is any instance where more than the maximum allowable WIC benefits are issued for a benefit period.
- B. Per the contract, between the local agency and the state office, the local agency is responsible for any WIC funds misspent due to over issuance.



Over-issuance con't.

1. The state office will charge the local agency a monetary penalty for the value of the **benefit** over issuance.
2. ***When an over issuance of benefits has been determined by the State WIC office, a notification letter and invoice will be sent to the local agency.***
3. ***The local agency must reimburse the state WIC office in the form of a check.***

Chapter 8 con't.

- 8.7
 - Replacing benefits in unusual circumstances
- 8.8
 - Returned formula (SPIRIT and Utilities site)
 - Tables updated

Chapter 9

- 9.9 Fruit & vegetable benefits may be redeemed for over amount on the benefit if participant pays difference.
 - Cannot be required to pay the difference and still have option to return items to be at or below benefit amount.
- 9.13 Retailer Monitoring Changes
 - Retailers monitored twice per contract period = about half your stores per year.
 - Mandatory interactive training added to monitoring process.

A stylized, colorful illustration of various food items including a green leafy vegetable, a yellow corn cob, a pink bell pepper, a red tomato, and a light brown fork, all overlapping each other.

Questions?

Please put them in the box...

A stylized, flat-design illustration of autumn-themed food items. It includes a yellow pumpkin with white lines, a green leaf, a pink radish, a red tomato, and a light brown fork. The word "BREAK" is overlaid in red capital letters.

BREAK

Spirit Utilities

Mark Walker (Missoula)

Dick Michaelis (Billings)



Introduction

In an effort to make the data from M-Spirit more available and meaningful the Spirit Utilities website was developed.

The website was first introduced on a Local Agency Call on May, 2014, at that time it only had 6 reports and an interface with M-Spirit for Formula Returns.

Spirit Utilities

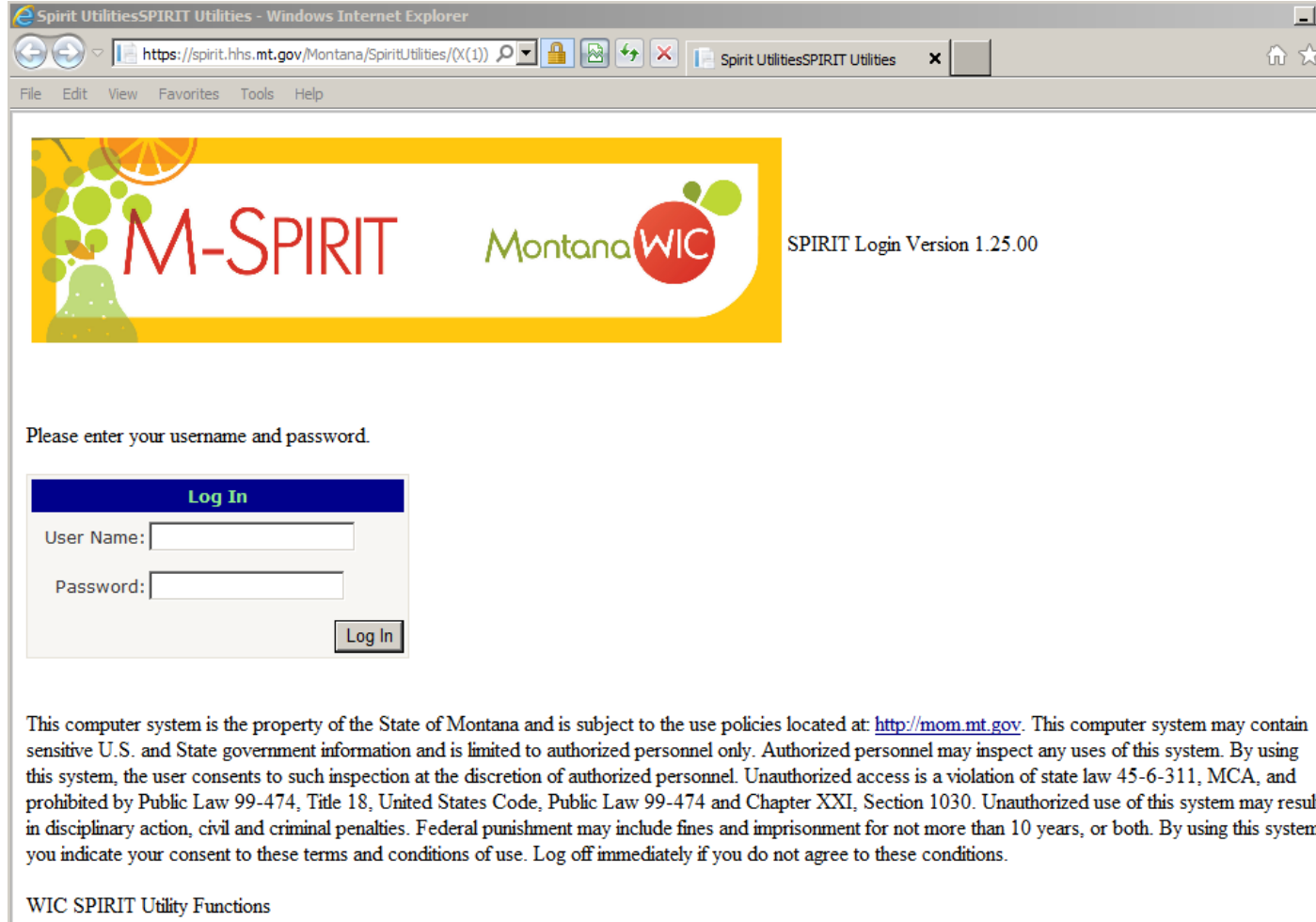
Spirit Utilities solves the problem of emailing confidential HIPAA information.

Report requests can be standardized, eliminating the request, “same as last year”.

Reports can be run at the Agency or Clinic level on demand rather than waiting for the State Office.



Let's look at the Spirit Utilities site!



Spirit UtilitiesSPIRIT Utilities - Windows Internet Explorer

https://spirit.hhs.mt.gov/Montana/SpiritUtilities/(X(1))

File Edit View Favorites Tools Help

M-SPIRIT Montana WIC SPIRIT Login Version 1.25.00

Please enter your username and password.

Log In

User Name:

Password:

Log In

This computer system is the property of the State of Montana and is subject to the use policies located at <http://mom.mt.gov>. This computer system may contain sensitive U.S. and State government information and is limited to authorized personnel only. Authorized personnel may inspect any uses of this system. By using this system, the user consents to such inspection at the discretion of authorized personnel. Unauthorized access is a violation of state law 45-6-311, MCA, and prohibited by Public Law 99-474, Title 18, United States Code, Public Law 99-474 and Chapter XXI, Section 1030. Unauthorized use of this system may result in disciplinary action, civil and criminal penalties. Federal punishment may include fines and imprisonment for not more than 10 years, or both. By using this system you indicate your consent to these terms and conditions of use. Log off immediately if you do not agree to these conditions.

WIC SPIRIT Utility Functions



After Login



SPIRIT Utility Functions Home

Hello, CS2698 ! [Log off](#)

Version 1.29



Please note the Activities and Report sections.



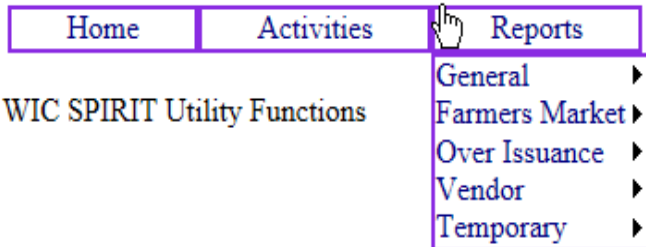
In the Report section



SPIRIT Utility Functions Home

Hello, CS2698 ! [Log off](#)

Version 1.29



In the Report section there is drop down list of available selections



SPRIT Utility Functions Home
Hello, CS2698 ! [Log off](#)
Version 1.29

Home	Activities	Reports
WIC SPRIT Utility Functions		
		<div><div>General</div><div>Farmers Market</div><div>Over Issuance</div><div>Vendor</div><div>Temporary</div></div> <div><div>Agency Appointments QA</div><div>Appointments For Day</div><div>Certs and Issuance Summary</div><div>Clinic Immunization Assessment Report</div><div>EPI BMI (Children 2-4)</div><div>EPI Breast Feeding</div><div>EPI Smoking Cessation</div><div>FFY Breastfeeding Data By Local Agency (USDA)</div><div>Participation By Category (Agency)</div><div>Participation By Category (Clinic)</div><div>Participation Report</div></div>



Once a Report has been selected, the Report Parameters will need to be entered.



SPIRIT Reports Hello, CS2698 ! [Log off](#)
Version 1.29

Home	Activities	Reports
Select Reports	Enter Report Parameters	View Results
	Export to Excel	

Report Title: Appointments For Day

This report displays appointment data for the specified day at the Agency. Appointments are listed by State WIC ID number, Name and Date of Birth. The current WIC Status is listed with the time and Client's main telephone number.

The WIC Status is:

- P = Pregnant
- B = Breastfeeding
- N = Non-Breastfeeding
- I = Infant
- C = Child

From Date:

Agency:

Clinic:

WIC SPIRIT Utility Functions



To view the Output click on “View Results”.



Hello, CS2698 ! [Log off](#)
SPIRIT Reports
Version 1.29

Home	Activities	Reports	
Select Reports	Enter Report Parameters	View Results	Export to Excel

Appointments For Day

From Date: 09/02/2014

Agency: SHERIDAN

Clinic: All

Agency	Clinic	State WIC ID	First Name	Last Name	Date of Birth	WIC Status	Appointment Time	Telephone
SHERIDAN	RICHLAND COUNTY WIC	00606571	OLIVE OYL	POPEYE	04/22/2013	C	3:00PM	

You are viewing page 1 of 1

WIC SPIRIT Utility Functions



To export the output to Excel click on
“Export to Excel”.



SPiRiT Reports
Hello, CS2698 ! [Log off](#)
Version 1.29



Home	Activities	Reports	
Select Reports	Enter Report Parameters	View Results	Export to Excel

Appointments For Day

From Date: 09/02/2014

Agency: SHERIDAN

Clinic: All

Agency	Clinic	State WIC ID	First Name	Last Name	Date of Birth	WIC Status	Appointment Time	Telephone
SHERIDAN	RICHLAND COUNTY WIC	00606571	OLIVE OYL	POPEYE	04/22/2013	C	3:00PM	

You are viewing page 1 of 1

WIC SPIRiT Utility Functions



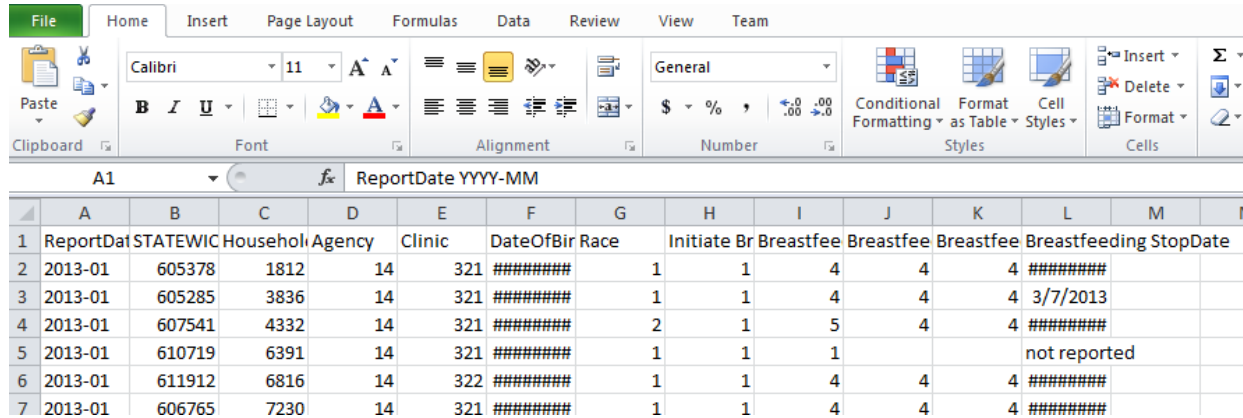
Do you want to open or save?



Hint: it is usually better to Open the results and then save the file in a name that will help you find the report.



Working in Excel



	A	B	C	D	E	F	G	H	I	J	K	L	M	N
1	ReportDate	STATEWIC	Household	Agency	Clinic	DateOfBir	Race	Initiate Br	Breastfee	Breastfee	Breastfee	Breastfeeding	StopDate	
2	2013-01	605378	1812	14	321	#####		1	1	4	4	4	#####	
3	2013-01	605285	3836	14	321	#####		1	1	4	4	4	3/7/2013	
4	2013-01	607541	4332	14	321	#####		2	1	5	4	4	#####	
5	2013-01	610719	6391	14	321	#####		1	1	1			not reported	
6	2013-01	611912	6816	14	322	#####		1	1	4	4	4	#####	
7	2013-01	606765	7230	14	321	#####		1	1	4	4	4	#####	

Here are a few tips when using Excel:

- 1) The report arrives in excel with all the columns the same width so the column widths will need to be adjusted.
- 2) The information (data) may need to be sorted to make the output more useful.
- 3) An understanding of printing in Excel with the “page layout” property tab is extremely handy.

Excel Report

EPIBreastFeeding.csv - Microsoft Excel

	A	B	C	D	E	F	G	H	I	J	K	L
	ReportDate YYYY-MM	STATEWICID	Household	Agency	Clinic	DateOfBirth	Race	Initiate Breastfeeding 1=Yes, 0=No	Breastfeeding AtThreeMonths 1=Fully, 2=Substantially, 5=Partially, 4=NA, Blank=Unknown	Breastfeeding AtSixMonths	Breastfeeding AtTwelveMon ths	Breastfeeding StopDate
1												
2	2013-08	610002	2573	3	71	8/2/2013	1	0	4	4	4	not reported
3	2013-08	610157	119305	3	71	8/3/2013	2	1	4	4	4	8/5/2013
4	2013-08	610230	2718	3	71	8/8/2013	1	1	4	4	4	8/9/2013
5	2013-08	610323	584897	3	71	8/6/2013	1	0	4	4	4	not reported
6	2013-08	610366	582152	3	71	8/9/2013	1	0	4	4	4	not reported
7	2013-08	610406	3726	3	71	8/9/2013	2	0	4	4	4	not reported
8	2013-08	610455	583499	3	71	8/15/2013	1	1	1	1		not reported

Excel Reporting

Demonstrations and Examples



Computer Security and Usage

- Every time you log on you agree to the terms and conditions of internet use
- Please also be aware of your local IT policies

A word about computer Security and Usage

The computer you are using, most likely is not your computer.

- Your employer is trusting you to make good decision with the use of the computer.
- You shouldn't put your employer's computer at risk of catching a virus or malware.
- Your computer should be used for work purposes only.
- Stay away from Twitter, YouTube, celebrity posts, shopping, games and the sports Page. (any non work related sites)
- If you have a slow internet, watch for abusive bandwidth hogging. (Streaming, Radio and the like)



Food Package Questions

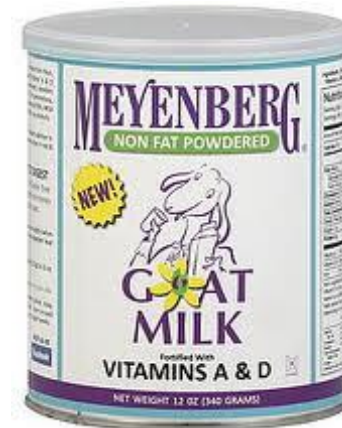
Kate Girard (Missoula)
Chris Fogelman (Billings)



Goat Milk



Whole Goat Milk



Low Fat or Non Fat Goat Milk

Breastfeeding Data

Kate Girard (Missoula)

Lisa Schmidt (Billings)



Background

- Topic discussed through WFSG and with local agencies
- Started working with Epi (Lisa) last Fall
- Changed to SPIRIT in 2010- lots of data now
- Started with breastfeeding



Breastfeeding data

- Sending out some data monthly (newsletter)
 - Rural state- monthly data fluctuates greatly
- State level analysis:
 - Will be publishing a “Surveillance Report” which will be updated annually.
 - This will be about 4 pages including methods and tables
 - Hopefully ready Oct/Nov...

Methods

- Data pull from M-SPIRIT*
- All infants participating on program 2010-2012
- By agency & race/ethnicity
- Level of Breastfeeding (initiation/3/6/12 months)
 - Correlates with FOOD PACKAGE (not CDC definition)
 - Combo partial/substantial
- Lag time of 1 year (cover full first year of life)

*Montana- Successful Partners in Reaching Innovative Technology



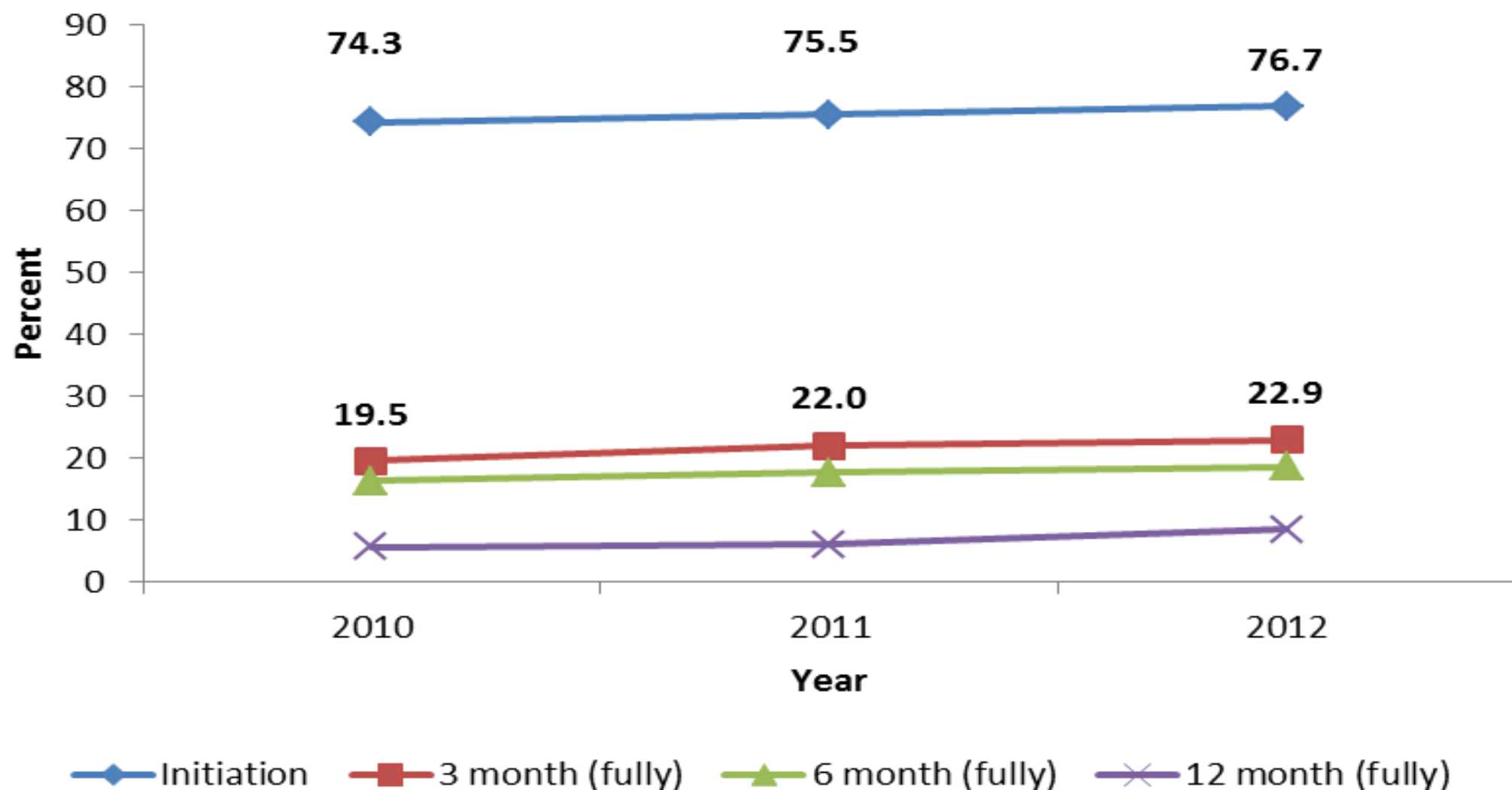
Methods

- Data analyzed using SAS statistical software, version 9.3
- Missing values excluded from analyses
- Chi-square tests used to determine significance
- Data suppressed for fewer than 5 events

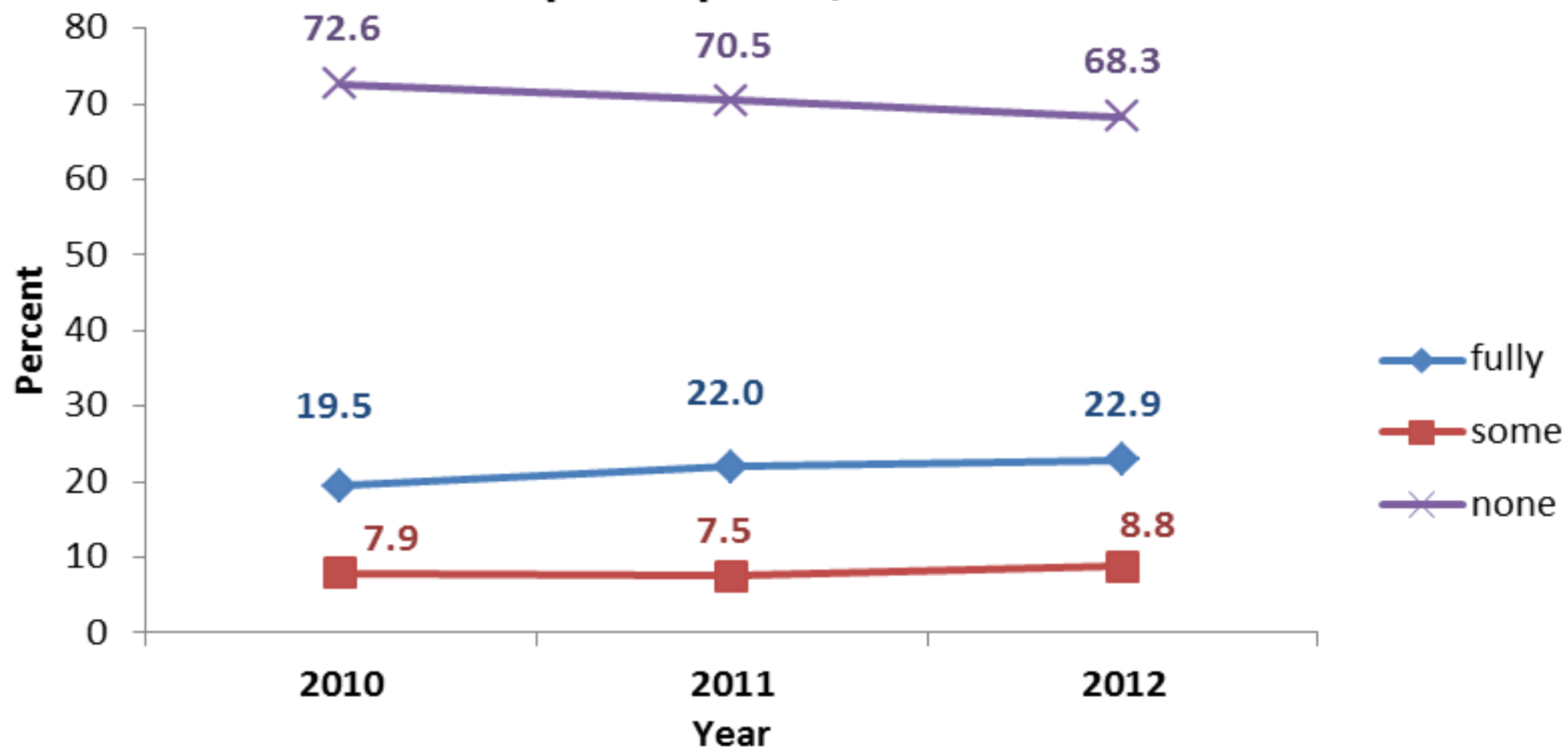
The 2020 targets are as follows:

Number	Objective	Baseline (year measured) %	2020 Target %
MICH-21	Increase the proportion of infants who are breastfed:	(2006 births)	
MICH-21.1	Ever	74.0	81.9
MICH-21.2	At 6 months	43.5	60.6
MICH-21.3	At 1 year	22.7	34.1
MICH-21.4	Exclusively through 3 months	33.6	46.2
MICH-21.5	Exclusively through 6 months	14.1	25.5
MICH-22	Increase the proportion of employers that have worksite lactation support programs	25.0 (2009)	38.0
MICH-23	Reduce the proportion of breastfed newborns who receive formula supplementation within the first 2 days of life	24.2 (2006 births)	14.2
MICH-24	Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies	2.9 (2009)	8.1

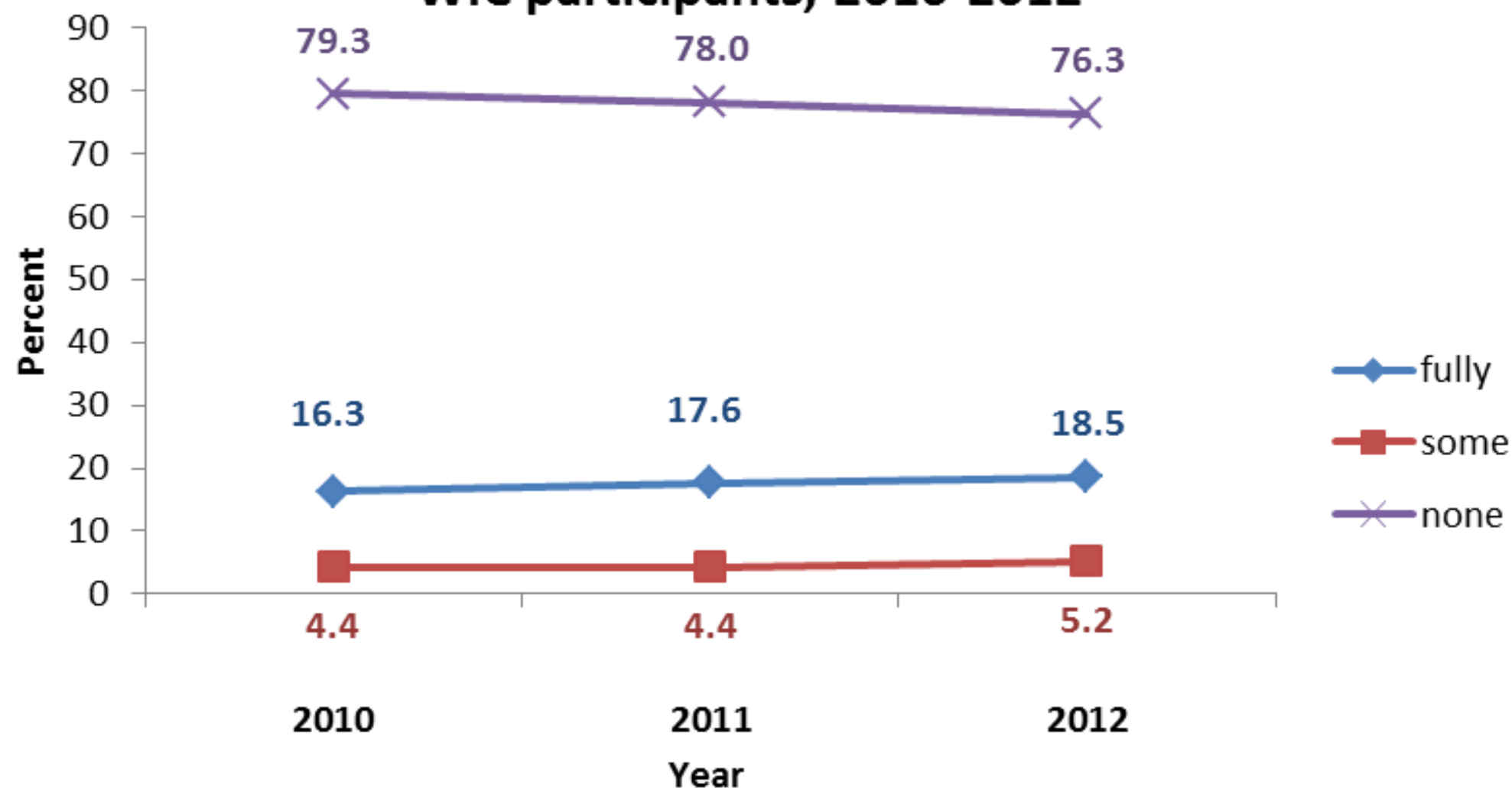
Breastfeeding rates among Montana WIC participants, 2010-2012



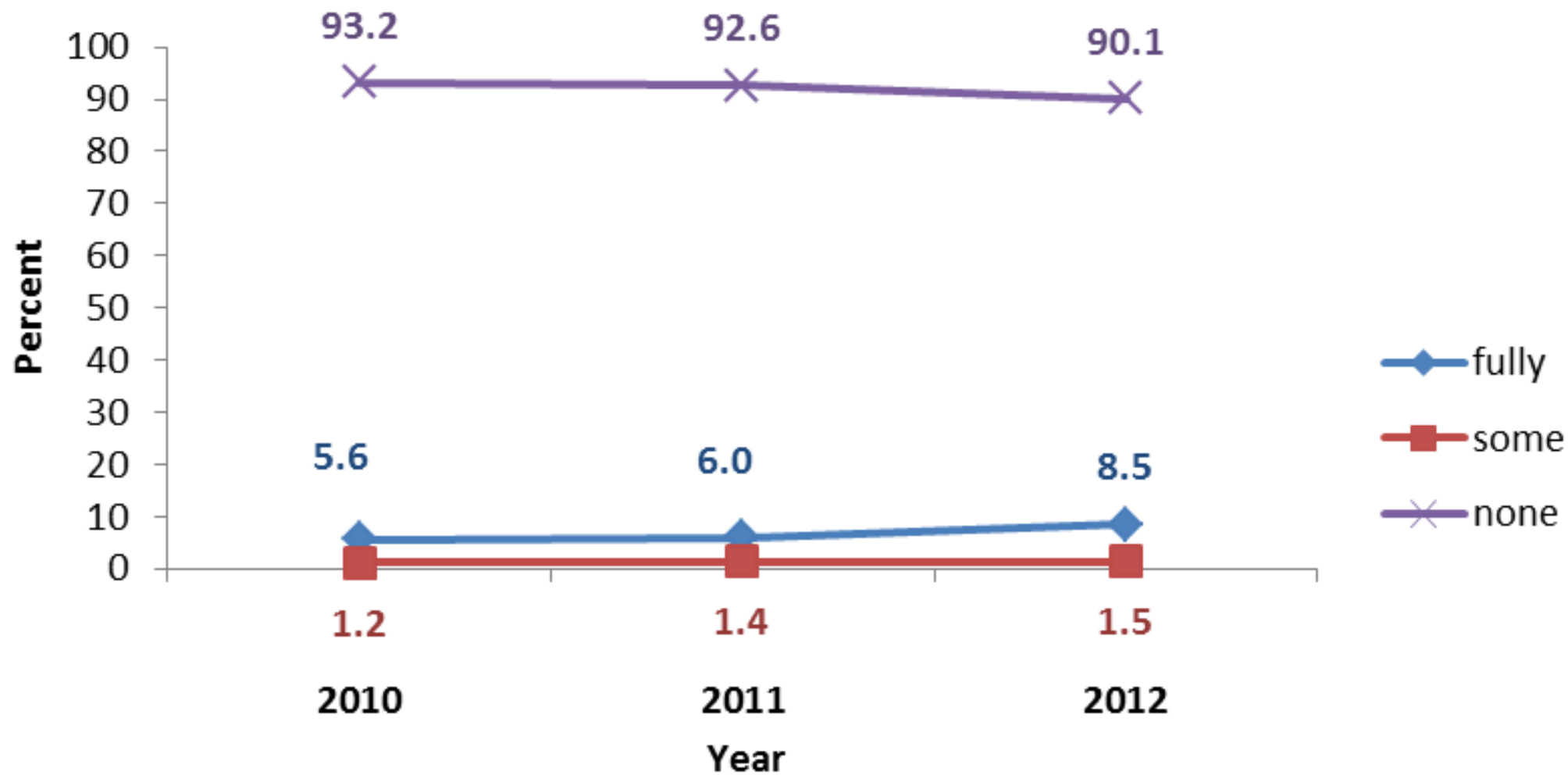
Breastfeeding rates at 3 months among Montana WIC participants, 2010-2012



Breastfeeding rates at 6 months among Montana WIC participants, 2010-2012



Breastfeeding rates at 12 months among Montana WIC participants, 2010-2012



Breastfeeding among WIC participants

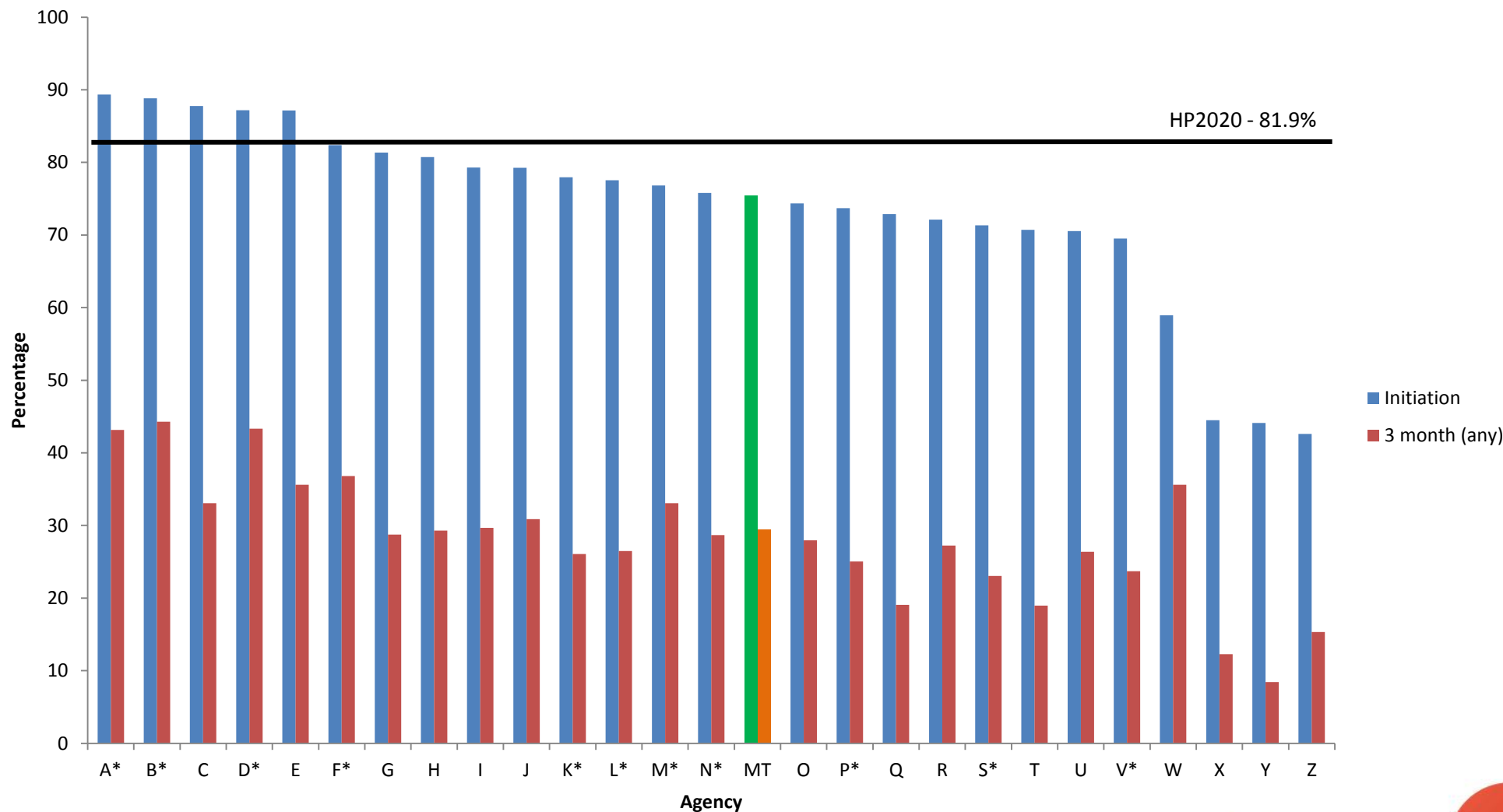
	<div>20102012</div>					
	n	%	n	%	MH Chi square (2010 v 2012)	p-value
Initiation	5390	74.3	4833	76.7	10.83	<0.001
3 months (any)	1685	27.4	1778	31.7	25.6	<0.0001
6 months (any)	1356	20.7	1406	23.8	16.79	<0.0001
12 months (any)	448	6.8	571	9.9	39.3	<0.0001

		2010-2012			
		Initiation	Fully	Some	None
		%	%	%	%
Small/Medium (n=8550)	Initiation	69			
	3 months		17	8	75
	6 months		14	5	81
	12 months		5	1	94
Large (n=11872)	Initiation	80			
	3 months		25	8	68
	6 months		20	5	75
	12 months		8	1	91

Breastfeeding among WIC participants in **medium** agencies with and without peer counselors

	PC		No PC			
	n	%	n	%	MH Chi square (PC v No PC)	p-value
Initiation	2092	78.2	2240	60.3	226.9	<0.0001
3 months (fully)	505	21.9	488	14.5	52.2	<0.0001
6 months (fully)	434	17.6	432	12.2	34.1	<0.0001
12 months (fully)	183	7.5	140	4.0	32.6	<0.0001

Breastfeeding rates for Montana WIC participants, by agency, 2010-2012



What's next

- Hope to do the same with BMI and smoking data
- Maybe other topics as well
- Hope to use this data in program initiatives, nutrition and breastfeeding plans, trainings...

A stylized, flat-design illustration of various vegetables and a fork. The vegetables include a yellow onion, a green leafy vegetable, a green bell pepper, a pink radish, a red tomato, and a green leaf. A light brown fork is positioned horizontally in front of the vegetables. The word "Questions..." is written in a large, black, sans-serif font across the center of the illustration.

Questions...